CHANGE OF CORRESPONDENCE ADDRESS Application	Application Number	10/038,016
	Filing Date	01/03/02
	First Named Inventor	R. Lawrence Ives
Address to:	Art Unit	2817
Assistant Commissioner for Patents	Examiner Name	Unknown
Washington, D.C. 20231	Attorney Docket Number	3522

Please change the Correspondence Address for the above-identified application to:

☐   Customer Number [   ] ───────────►   Place Customer Number Bar Code Label here

               Type Customer Number here

OR

☒ Firm or Individual Name	James H. Fritz				
Address	620 Newport Center Drive, Suite 900				
Address					
City	Newport Beach	State	CA	ZIP	92660
Country	USA				
Telephone	(949) 717-7900	Fax	(949) 717-7977		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

☐   Applicant/Inventor.

☐   Assignee of record of the entire interest.
     Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒   Attorney or Agent of record.

☐   Registered practitioner named in the application transmittal letter in an application without an
     executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

FAX COPY RECEIVED

JUN 2 4 2002

TECHNOLOGY CENTER 2800

Typed or Printed Name	James H. Fritz
Signature	
Date	6/24/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐   *Total of _____ forms are submitted.